

Please type a plus sign (+) inside this box 

Approved for use through 10/31/2002. OMB 0651-0032

Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

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# UTILITY PATENT APPLICATION TRANSMITTAL

(Only for new nonprovisional applications under 37 CFR 1.53(b))

Attorney Docket No.	TID-34165
First Inventor	Christoph Hechtl
Title	METHOD OF INSPECTING A MASK

Express Mail Label No. EV053667357US

**APPLICATION ELEMENTS**

See MPEP chapter 600 concerning utility patent application contents

1.  Fee Transmittal Form (e.g., PTO/SB/17)  
(Submit an original, and a duplicate for fee processing)

2.  Applicant claims small entity status.  
See 37 CFR 1.27.

3.  Specification  
(preferred arrangement set forth below)
 

[ Total Pages	8
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- Descriptive title of the Invention
- Cross Reference to Related Applications
- Statement Regarding Fed sponsored R & D
- Reference to sequence listing, a table, or a computer program listing appendix
- Background of the Invention
- Brief Summary of the Invention
- Brief Description of the Drawings (if filed)
- Detailed Description
- Claim(s)
- Abstract of the Disclosure

4.  Drawing(s) (35 U.S.C. 113)
 

[ Total Sheets	1
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5. Oath or Declaration  UNSIGNED
 

[ Total Pages	3
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a.  Newly Executed (original or copy)

b.  Copy from a prior application (37 CFR 1.63(d))  
(for continuation/divisional with Box 18 completed)

i.  **DELETION OF INVENTOR(S)**

Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b).

6.  Application Data Sheet. See 37 CFR 1.76

**ADDRESS TO:**Commissioner for Patents  
PO Box 1450  
Alexandria, VA 22313-1450

7.  CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix)

8.  Nucleotide and/or Amino Acid Sequence Submission  
(if applicable, all necessary)
 

- a.  Computer Readable Form (CRF)
- b. Specification Sequence Listing on:
  - i.  CD-ROM or CD-R (2 copies); or
  - ii.  paper
- c.  Statements verifying identity of above copies

**ACCOMPANYING APPLICATION PARTS**

9.  Assignment Papers (cover sheet & documents(s))

10.  37 CFR 3.73(b) Statement  
(when there is an assignee)  Power of Attorney

11.  English Translation Document (if applicable)

12.  Information Disclosure Statement (IDS)/PTO-1449  Copies of IDS Citations

13.  Preliminary Amendment

14.  Return Receipt Postcard (MPEP 503)  
(Should be specifically itemized)

15.  Certified Copy of Priority Document(s)  
(if foreign priority is claimed)

16.  Request and Certification under 35 U.S.C. 122  
(b)(2)(B)(i). Applicant must attach form PTO/SB/35 or its equivalent.

17.  Other:

18. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in a preliminary amendment, or in an Application Data Sheet under 37 CFR 1.76:

Continuation     Divisional     Continuation-in-part (CIP)

of prior application No: \_\_\_\_\_ / \_\_\_\_\_

Examiner \_\_\_\_\_

Group / Art Unit: \_\_\_\_\_

Prior application information: \_\_\_\_\_ For CONTINUATION OR DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 6b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.

**19. CORRESPONDENCE ADDRESS**

Customer Number or Bar Code Label

23494

(Insert Customer No. or Attach bar code label here)

or  Correspondence address below

NAME	Texas Instruments Incorporated		
ADDRESS			
CITY	STATE	TX	ZIP CODE
COUNTRY	TELEPHONE	(214) 532-9348	FAX (972)917-4418

Name (Print/Type)	Jacqueline J. Gaynor	Registration No. (Attorney/Agent)	Reg. No. 36,144
Signature	7/31/03		

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# **FEE TRANSMITTAL for FY 2001**

<b>FEE TRANSMITTAL for FY 2001</b>		<i>Complete If Known</i>	
		Application Number	TBD
		Filing Date	07/31/2003
		First Named Inventor	Christoph Hechtl
		Examiner Name	TBD
		Group Art Unit	TBD
<b>TOTAL AMOUNT OF PAYMENT</b>	<b>(\\$) 750.00</b>	Attorney Docket No.	TID-34165

METHOD OF PAYMENT				FEE CALCULATION (continued)																																																																																																																																																																																																								
<p>1. <input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge indicated fees and credit any overpayments to:</p> <p>Deposit Account Number <b>20-0668</b></p> <p>Deposit Account Name <b>Texas Instruments Incorporated</b></p> <p><input type="checkbox"/> Charge Any Additional Fee Required Under 37 CFR 1.16 and 1.17</p> <p><input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27</p>				<p>3. ADDITIONAL FEES</p> <table border="1"> <thead> <tr> <th colspan="2">Large Entity</th> <th colspan="2">Small Entity</th> <th rowspan="2">Fee Description</th> <th rowspan="2">Fee Paid</th> </tr> <tr> <th>Fee Code</th> <th>Fee (\$)</th> <th>Fee Code</th> <th>Fee (\$)</th> </tr> </thead> <tbody> <tr> <td>105</td> <td>130</td> <td>205</td> <td>65</td> <td>Surcharge - late filing fee of oath</td> <td></td> </tr> <tr> <td>127</td> <td>50</td> <td>227</td> <td>25</td> <td>Surcharge - late provisional filing fee or cover sheet</td> <td></td> </tr> <tr> <td>139</td> <td>130</td> <td>139</td> <td>130</td> <td>Non-English specification</td> <td></td> </tr> <tr> <td>147</td> <td>2,520</td> <td>147</td> <td>2,520</td> <td>For filing a request for ex parte reexamination</td> <td></td> </tr> <tr> <td>112</td> <td>920*</td> <td>112</td> <td>920*</td> <td>Requesting publication of SIR prior to Examiner action</td> <td></td> </tr> <tr> <td>113</td> <td>1,840*</td> <td>113</td> <td>1,840*</td> <td>Requesting publication of SIR after Examiner action</td> <td></td> </tr> <tr> <td>115</td> <td>110</td> <td>215</td> <td>55</td> <td>Extension for reply within first month</td> <td></td> </tr> <tr> <td>116</td> <td>390</td> <td>216</td> <td>195</td> <td>Extension for reply within second month</td> <td></td> </tr> <tr> <td>117</td> <td>890</td> <td>217</td> <td>445</td> <td>Extension for reply within third month</td> <td></td> </tr> <tr> <td>118</td> <td>1,390</td> <td>218</td> <td>695</td> <td>Extension for reply within fourth month</td> <td></td> </tr> <tr> <td>128</td> <td>1,890</td> <td>228</td> <td>945</td> <td>Extension for reply within fifth month</td> <td></td> </tr> <tr> <td>119</td> <td>310</td> <td>219</td> <td>155</td> <td>Notice of Appeal</td> <td></td> </tr> <tr> <td>120</td> <td>310</td> <td>220</td> <td>155</td> <td>Filing a brief in support of an appeal</td> <td></td> </tr> <tr> <td>121</td> <td>270</td> <td>221</td> <td>135</td> <td>Request for oral hearing</td> <td></td> </tr> <tr> <td>138</td> <td>1,510</td> <td>138</td> <td>1,510</td> <td>Petition to institute a public use proceeding</td> <td></td> </tr> <tr> <td>140</td> <td>110</td> <td>240</td> <td>55</td> <td>Petition to revive - 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*\*or number previously paid, if greater. For Reissue, see above*

\*Reduced by Basic Filing Fee Paid

**SUBTOTAL (3) (\$)**

SUBMITTED BY		Complete (if applicable)		
Name (Print/Type)	Jacqueline J. Garner	Registration No. (Attorney/Agent)	36,144	Telephone (214) 532-9348
Signature			Date	7/31/03

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